



# UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
United States Patent and Trademark Office  
Address: COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, Virginia 22313-1450  
www.uspto.gov

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/934,735	08/22/2001	Rohit J. Parmar	119862-1000	9021

7590 05/20/2005

GARDERE WYNNE SEWELL LLP  
3000 Thanksgiving Tower  
1601 Elm Street Suite 3000  
Dallas, TX 75201-4767

EXAMINER

CORRIELUS, JEAN M

ART UNIT PAPER NUMBER

2162

DATE MAILED: 05/20/2005

Please find below and/or attached an Office communication concerning this application or proceeding.

## Office Action Summary

**Application No.**

09/934,735

**Applicant(s)**

PARMAR, ROHIT J.

**Examiner**

Jean M Corrielus

**Art Unit**

2162

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

### Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE 3 MONTH(S) FROM THE MAILING DATE OF THIS COMMUNICATION.

- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If the period for reply specified above is less than thirty (30) days, a reply within the statutory minimum of thirty (30) days will be considered timely.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133). Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

### Status

- 1) ☒ Responsive to communication(s) filed on 08 February 2005.
- 2a) ☒ This action is **FINAL**. 2b) ☐ This action is non-final.
- 3) ☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

### Disposition of Claims

- 4) ☒ Claim(s) 1,3,4,6,8,9,11,12,14,16 and 17 is/are pending in the application.
- 4a) Of the above claim(s) \_\_\_\_\_ is/are withdrawn from consideration.
- 5) ☐ Claim(s) \_\_\_\_\_ is/are allowed.
- 6) ☒ Claim(s) 1,3,4,6,8,9,11,12,14,16 and 17 is/are rejected.
- 7) ☐ Claim(s) \_\_\_\_\_ is/are objected to.
- 8) ☐ Claim(s) \_\_\_\_\_ are subject to restriction and/or election requirement.

### Application Papers

- 9) ☐ The specification is objected to by the Examiner.
- 10) ☐ The drawing(s) filed on \_\_\_\_\_ is/are: a) ☐ accepted or b) ☐ objected to by the Examiner.  
Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).  
Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).
- 11) ☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

### Priority under 35 U.S.C. § 119

- 12) ☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).
- a) ☐ All b) ☐ Some \* c) ☐ None of:
1. ☐ Certified copies of the priority documents have been received.
  2. ☐ Certified copies of the priority documents have been received in Application No. \_\_\_\_\_.
  3. ☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

\* See the attached detailed Office action for a list of the certified copies not received.

### Attachment(s)

- 1) ☒ Notice of References Cited (PTO-892)
- 2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)
- 3) ☐ Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)  
Paper No(s)/Mail Date \_\_\_\_\_.
- 4) ☐ Interview Summary (PTO-413)  
Paper No(s)/Mail Date \_\_\_\_\_.
- 5) ☐ Notice of Informal Patent Application (PTO-152)
- 6) ☐ Other: \_\_\_\_\_.

### **DETAILED ACTION**

1. This office action is in response to the amendment filed on February 8, 2005, in which claims 1, 3, 4, 6, 8, 9, 11, 12, 14, 16 and 17 are presented for further examination.

#### ***Response to Arguments***

2. Applicant's arguments with respect to claims 1, 3, 4, 6, 8, 9, 11, 12, 14, 16 and 17 have been considered but are moot in view of the new ground(s) of rejection necessitated by amendment.

#### ***Claim Rejections - 35 USC § 103***

3. The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all obviousness rejections set forth in this Office action:

(a) A patent may not be obtained though the invention is not identically disclosed or described as set forth in section 102 of this title, if the differences between the subject matter sought to be patented and the prior art are such that the subject matter as a whole would have been obvious at the time the invention was made to a person having ordinary skill in the art to which said subject matter pertains. Patentability shall not be negated by the manner in which the invention was made.

4. Claims 1, 3, 4, 6, 8, 9, 11, 12, 14 and 16 are rejected under 35 U.S.C. 103(a) as being unpatentable over Garcia US Patent no. 6,088,429, Haudenschild US Patent no. 6,665,647 and Joao US Patent no. 6,283,761.

As to claim 1, Garcia discloses the claimed discloses the claimed "at least one database" (col.2, line 67); "a data collection module, the data collection module in communication with the database and being configured to collect and stored patient test data, patient information, and healthcare provider information" (col.3, lines 2-20); "a data viewing module; the data viewing module in communication with the database and being configured to allow access to and modification of the patient test data" (col.9, lines 14-22, lines 55-63; col.11, lines 18-28); and

Art Unit: 2162

“patient access module, the patient access module in communication with the database and being configured to allow access by a user to view tests performed on a patient” (col.4, lines 45-48; col.6, lines 55-57; col.7, lines 10-15). Garcia does not explicitly disclose the claimed “a report generation module, the report generation module in communication with the database and being configured to produce reports from the patient test data” and both the data viewing and editing module, and the patient information access module that are each configured to limit access to patient test data to users who are authorized health care workers. Garcia, however, has the capability of enabling generation of reports that document the effectiveness of the application at reaching patients (col.4, lines 60-63).

On the other hand, Haudenschild discloses an analogous system that provides an enterprise healthcare management system using an Internet to access the remotely hosted applications, wherein the health care enterprise needs to compute resources sufficient to allow secure, quality access to the Internet. In particular, Haudenschild discloses both the data viewing and editing module, and the patient information access module that are each configured to limit access to patient test data to users who are authorized health care workers (col.6, lines 7-33, and 41-65) and discloses the claimed “a report generation module, the report generation module in communication with the database and being configured to produce reports from the patient test data” (col.8, lines 37-466, and lines 58-65; col.9, lines 30-38; col.10, lines 1-5). It would have been obvious to one having ordinary skill in the art at the time the invention was made to combine the teachings of the cited references, wherein the interactive medical database, provided therein (see Garcia’s fig.2, item 214) would incorporate the use of providing both the data viewing and editing module, and the patient information access module that are each configured

Art Unit: 2162

to limit access to patient test data to users who are authorized health care workers and generating reports from patient test data, in the same conventional manner as disclosed by Hauhschild (col.6, lines 7-33, and 41-65; col.8, lines 37-466, and lines 58-65; col.9, lines 30-38; col.10, lines 1-5; col.11, lines 48-67). One having ordinary skill in the art would have found it motivation to do such a combination because that would provide Garcia's system the enhanced capability of generating periodic patient report to thereby assist the patient care in assimilating the information in the least possible time while eliminating the necessity to consider irrelevant test data which might otherwise become intermixed with that appearing in the patient report and also to provide authorization access to patient information , thereby preventing unauthorized user from accessing patient information.

Neither Garcia nor Haudenschild discloses the claimed "wherein the data collection module comprises one or more test data entry forms configured to accept digital signatures".

Joao, however, discloses a system for providing healthcare information and/or healthcare related information for a variety of healthcare and healthcare related application. Joao discloses the claimed "wherein the data collection module comprises one or more test data entry forms configured to accept digital signatures" (col.18, lines 35-43). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the combined system Garcia and Hauhschild, wherein the interactive medical database, provided therein (see Garcia's fig.2, item 214) would incorporate the use of configuring the test data entry forms to accept digital signatures, in the same conventional manner as disclosed by Joao (col.18, lines 35-43). One having ordinary skill in the art would have found it motivation to do such a modification for the purpose of improving healthcare treatments by reducing the likelihood of

Art Unit: 2162

errors in diagnoses, incorrect and/or fraudulent care, thereby improving quality of care and cost efficiency and providing comprehensive and accurate information to any of the parties.

As to claim 3, Garcia disclose the claimed “wherein the specialized healthcare need is cardiovascular care” (col.3, lines 1-5).

As to claim 4, Garcia disclose the claimed “a physician viewing module in communication with the database and being configured to allow physicians to view patient test data” (col.7, lines 10-15; col.9, lines 13-20).

As to claims 6, 8, 9 and 11:

Claims 6, 8, 9 and 11 are the computer program embodied on a computer readable medium for performing the system of claims 1, 3, and 4. They rejected under the same rationale. In addition, Garcia discloses the claimed and “a code segment to a fax report” (col.11, line 35-col.12, line 17; col.7, lines 10-15; col.9, lines 13-20). Neither Garcia nor Haudenschild discloses the claimed “wherein the code segment to edit further includes a code segment to view test data entry forms and a code segment for affix a digital signature”. Joao, however, discloses a system for providing healthcare information and/or healthcare related information for a variety of healthcare and healthcare related application. Joao discloses the claimed ““wherein the code segment to edit further includes a code segment to view test data entry forms and a code segment for affix a digital signature”. (col.18, lines 35-43). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the combined system Garcia and

Art Unit: 2162

Hauhenschild, wherein the interactive medical database, provided therein (see Garcia's fig.2, item 214) would incorporate the use of configuring the test data entry forms to accept digital signatures, in the same conventional manner as disclosed by Joao (col.18, lines 35-43). One having ordinary skill in the art would have found it motivation to do such a modification for the purpose of improving healthcare treatments by reducing the likelihood of errors in diagnoses, incorrect and/or fraudulent care, thereby improving quality of care and cost efficiency and providing comprehensive and accurate information to any of the parties.

As to claims 12, 14 and 16:

Claims 12, 14 and 16 are method claims to perform the system claims 1, 3 and 4. They are, therefore, rejected under the same rationale. Neither Garcia nor Haudenschild discloses substantially the invention as claimed, except for the claimed "wherein the data collection module comprises one or more test data entry forms configured to accept digital signatures". Joao, however, discloses a system for providing healthcare information and/or healthcare related information for a variety of healthcare and healthcare related application. Joao discloses the claimed "wherein the data collection module comprises one or more test data entry forms configured to accept digital signatures" (col.18, lines 35-43). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the combined system Garcia and Hauhenschild, wherein the interactive medical database, provided therein (see Garcia's fig.2, item 214) would incorporate the use of configuring the test data entry forms to accept digital signatures, in the same conventional manner as disclosed by Joao (col.18, lines 35-43). One having ordinary skill in the art would have found it motivation to do such a

Art Unit: 2162

modification for the purpose of improving healthcare treatments by reducing the likelihood of errors in diagnoses, incorrect and/or fraudulent care, thereby improving quality of care and cost efficiency and providing comprehensive and accurate information to any of the parties.

5. Claim 17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Garcia Haudenschild and Joao as applied to claims 1, 3, 4, 6, 8, 9, 11, 12, 14 and 16 above, and further in view of Coli US Patent No. 4,315,309.

As to claims 17, Neither Garcia nor Haudenschild discloses the claimed “wherein the data collection module includes one or more test data entry forms”; “selecting a test data entry form relating to particular test that is to be collected (col.) and “using the test entry form to enter the collected data”. Coli, however, discloses the claimed “wherein the data collection module includes one or more test data entry forms” (col.9, lines 47-50, lines 65-67); “selecting a test data entry form relating to particular test that is to be collected (col.9, lines 47-50, lines 65-67); and “using the test entry form to enter the collected data”. (Col.9, lines 47-50, lines 65-67). It would have been obvious to one having ordinary skill in the art at the time the invention was made to combine the teachings of the cited references, wherein the interactive medical database, provided therein (see Garcia’s fig.2, item 214) would incorporate the use of including on or more test data entry forms in the same conventional manner as disclosed by Coli (col.9, lines 47-50, lines 65-67). One having ordinary skill in the art would have found it motivation to do such a combination because that would provide Garcia’s system the enhanced capability of providing one or more test data entry forms to thereby assist the patient care in assimilating the information



Art Unit: 2162

in the least possible time while eliminating the necessity to consider irrelevant test data which might otherwise become intermixed with that appearing in the patient report.

**Conclusion**

6. Applicant's amendment necessitated the new ground(s) of rejection presented in this Office action. Accordingly, **THIS ACTION IS MADE FINAL**. See MPEP § 706.07(a). Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).


A shortened statutory period for reply to this final action is set to expire **THREE MONTHS** from the mailing date of this action. In the event a first reply is filed within **TWO MONTHS** of the mailing date of this final action and the advisory action is not mailed until after the end of the **THREE-MONTH** shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of the advisory action. In no event, however, will the statutory period for reply expire later than **SIX MONTHS** from the date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Jean M Corrielus whose telephone number is (571) 272-4032. The examiner can normally be reached on 10 hours shift.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, John Breene can be reached on (571) 272-4107. The fax phone number for the organization where this application or proceeding is assigned is 703-872-9306.

Art Unit: 2162

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see <http://pair-direct.uspto.gov>. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free).



Jean M Corrielus  
Primary Examiner  
Art Unit 2162

May 12, 2005